

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Put Alaska First

FEC IDENTIFICATION NUMBER ▼

C C00544346

Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed onM M M / D D D / Y Y Y Y Y Y
/ /

Full Name of Payee

Ambrosino Muir Hansen Crounse

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2014Mailing Address 500 Sansome St
Ste 404

Amount

44420.00

City State Zip Code
San Francisco CA 94111-3218

Transaction ID : VNGY99W0MZ3

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2014Purpose of Expenditure
Direct MailCategory/
Type 004

Name of Federal Candidate

Dan Sullivan

☐ Support
☒ OpposeOffice Sought: ☐ House District: 00
☐ President ☒ Senate State: AKCalendar Year-To-Date
Per Election for Office Sought

6947299.88

Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name of Payee

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
/ /

Mailing Address

Amount

/ /

City State Zip Code

Date of Disbursement or Obligation

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/ /

Purpose of Expenditure

Category/
Type

Name of Federal Candidate

☐ Support
☐ OpposeOffice Sought: ☐ House District: _____
☐ President ☐ Senate State: _____Calendar Year-To-Date
Per Election for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

44420.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

44420.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jim Lottsfeldt

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Signature